

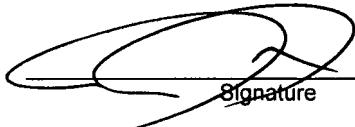


*AM/BS*

PTO/SB/31 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031  
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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) N9810.0029/P029
In re Application of Harry A. Dugger, III et al.		
Application Number 10/671,720-Conf. #9272		Filed September 29, 2003
For BUCCAL, POLAR AND NON-POLAR SPRAY CONTAINING ALPRAZOLAM		
Art Unit 1616	Examiner M. Haghigian	
Applicant hereby <b>appeals</b> to the Board of Patent Appeals and Interferences from the last decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ 500.00
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ 250.00
<input type="checkbox"/> A check in the amount of the fee is enclosed.		08/22/2007 CNGUYEN2 00000033 10671720
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		01 FC:2401 250.00 0P
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.		
<input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>04-1073</u> . I have enclosed a duplicate copy of this sheet.		
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.		
I am the		
<input type="checkbox"/> applicant /inventor.		
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
<input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>32,115</u>		
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		
 <u>James W. Brady, Jr.</u> Typed or printed name		
<u>(202) 420-4786</u> Telephone number		
<u>August 21, 2007</u> Date		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
<input type="checkbox"/> *Total of <u>1</u> forms are submitted.		